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1999 RUSSIA WOMEN'S REPRODUCTIVE HEALTH SURVEY: Follow-up Study of Three Sites

Preliminary Report

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INTRODUCTION

From March through June of 1999, the Russia Women's Reproductive Health Follow-up Survey (RWRHS) was carried out in three locations in Russia. The survey was done in conjunction with the USAID-sponsored Russian Women's Reproductive Health Project, which consisted of a variety of components intended to expand and improve the use of effective contraception, reduce the reliance on abortion as a means of birth prevention, and to reduce reproductive-related morbidity and mortality. The project, which was implemented in six sites across Russia, included: the establishment of model family planning centers; provision of contraceptives; information/education/communication activities; training of family planning providers; and social marketing of contraceptives.

The primary objective of the 1999 RWRHS, which was a follow-up to a 1996 baseline survey and a 1998 interim survey, was to help assess the impact of the project. To ensure comparability between the 1996 and 1999 surveys, the methodology, implementation, and content of the two surveys were kept very similar. The general approach used in these surveys was a quasi-experimental one. The surveys were carried out in two sites that were included in the project and a control site not covered by the project. The two project sites were Ivanovo Oblast (province) and the city of Yekaterinburg (formerly Sverdlovsk). The non-project site was the city of Perm, selected because of its proximity and similarity in many respects (size, location, economic characteristics) to Yekaterinburg. The sites were compared using 1996 survey data and are being compared again as of 1999, to see if there has been greater improvement in the project sites than in Perm. Components of the project that seem to have made a positive impact might then be implemented elsewhere in Russia and perhaps in other countries of the region.

A second principal objective of the surveys has been the examination of various aspects of reproductive health status and needs in the three locations. Information collected might be used in the development or implementation of interventions. Because no nationwide reproductive health surveys have been conducted in Russia, these data may be valuable in describing reproductive health in much of the country. Because the organization of health services and levels of resources devoted to health were fairly uniform throughout Russia during the Soviet era, there is likely to be considerable generalizability of the data collected in this survey to much of the country, particularly the urban areas of European Russia.

The survey was designed to address several key issues, one of which is the use of abortion, which has been very widespread in Russia for many years. The primary goal of the project was to bring about a reduction in maternal morbidity and mortality through abortion rates. This is to be achieved principally through increased availability and improved use of modern contraceptive methods. An important topic examined in the survey is levels and trends in contraceptive prevalence and method selection and the extent to which family planning methods are being used effectively. Also, we are interested in women's opinions and attitudes about specific pregnancy prevention methods, and in women's knowledge of reproductive health, to see how well informed the population is and to assist in the development of information, education, and

communication (IEC) messages. We were interested as well in the reproductive health services women are using and their opinions about those services.

This preliminary report describes some of the key initial findings from the 1999 survey, but is not intended to be constitute a thorough treatment of the survey data. It should be kept in mind that all results presented here are preliminary and are subject to change in the final analysis. The final survey report, to be issued at a later date, will contain much greater detail and will include results and discussion of virtually all topics addressed in the survey.

METHODOLOGY

Organizational Structure

USAID was the motivating force behind the surveys, as well as the source of all funding for the undertaking. The All-Russian Centre for Public Opinion and Market research (VCIOM), a large nationwide organization with a national office in Moscow and 27 local offices across Russia, implemented the surveys. VCIOM was responsible for selecting the sample of households and individuals, recruiting and training interviewers, conducting field work, processing of the data, and performing part of the data analysis. The Division of Reproductive Health of the United States Centers for Disease Control and Prevention (DRH/CDC) provided technical assistance for all phases of the survey. DRH/CDC took the lead in development of the overall survey design, questionnaire construction, coordination of survey activities, and much of the data analysis. The participation of DRH/CDC was funded by USAID/Moscow through a Participating Agency Service Agreement between USAID's Office of Population and DRH/CDC. Other cooperating agencies involved in the Russian Women's Reproductive Health Project contributed significantly to questionnaire development and survey design.

Questionnaire Content

The 1999 RWRHS questionnaire covered a wide range of topics related to reproductive health status and needs. The major topics addressed were:

- Social, demographic, and economic characteristics
- Pregnancy, abortion, and fertility
- Maternal and child health
- Contraception
- Information, education, and communication concerning family planning
- Young adult sexuality
- Women's health (including sexually transmitted diseases)
- Domestic partner violence

Survey Design

The survey was designed to obtain completed interviews with representative samples of about 2,000 women aged 15 to 44 years in each of the three survey sites. In Yekaterinburg and Perm, the survey covered only the cities. In Ivanovo, women were sampled from throughout the oblast. Three-stage cluster sampling was used to select respondents. The sampling procedures were identical to those employed in the 1996 survey.

The first stage of sampling consisted of a selection of electoral districts, which served as the survey's primary sampling units (PSU). One hundred PSU were selected in each of the three sites. Within the cities, PSU were selected randomly within city districts. The number of PSU in each district was proportional to the district's population to ensure proportionality within cities. In Ivanovo oblast, the selection of PSU was based on the population of towns, rather than the population of districts. The sample was geographically self-weighting in Yekaterinburg and Perm. In Ivanovo, half of the PSU were in Ivanovo city, where family planning activity and access is thought to be greatest, while the other half were in the remainder of the oblast, which contains an estimated 65 percent of the population. Thus, analysis of Ivanovo data requires the application of geographic sample weights. The same PSU were used in the 1996 and 1999 surveys.

The second stage of sampling consisted of the selection of dwelling units from the selected PSU. After a random starting point was chosen, contiguous dwelling units were selected using listings of addresses published for the selected electoral districts. Each time a residence with no 15-44 year-old women was encountered, the interviewer added the next residence on the list. Within each selected PSU, about 20 interviews were expected.

The final stage of sampling consisted of the random selection of one woman between the ages of 15 and 44 in each selected residence that contained more than one woman in that age range.

The number of interviews completed was very close to 2,000 in each of the three sites (Table 1). The proportion of households in which a 15-44 year-old woman was identified ranged from 30 % (Yekaterinburg) to 46% (Ivanovo). In 13% to 18% of households, residents refused to give any information to interviewers concerning the household. However, individual response rates were high, with the proportion of selected women successfully interviewed varying between 90% (Perm) and 93% (Yekaterinburg).

CHARACTERISTICS OF THE POPULATION

Table 2 displays percentage distributions of age, marital status, educational attainment, nationality, and religion for all survey respondents. In each location, just under two-thirds of respondents were living in either a registered or unregistered marriage, with unregistered marriage most common in Perm. About one in five women had never been in union (i.e.,

married or living with a man). Almost two-thirds of respondents had finished their secondary education but had not received any post-secondary schooling. In Yekaterinburg and Perm, about 90% of women described themselves as ethnically Russian, while the figure was 94% in Ivanovo Oblast. A majority of respondents (60-74 percent) said they were Russian Orthodox, while most others described themselves as having no religion. Very small percentages reported that they were Muslim or adhered to some other religion.

Table 3 shows distributions of selected economic characteristics of survey respondents. Three of every five women (61%-63%) said they were currently employed outside the home (a few with more than one job) and another 6%-8% were on maternity leave from their jobs at the time of interview. The proportion describing themselves as unemployed (i.e., not working but wishing to do so) in Ivanovo was 15%, considerably higher than the 9-11% found in Perm and Yekaterinburg. As seen in the bottom panel of Table 3, between 83% and 94% of homes had a color television, 44%-61% had a VCR, 37%-51% had a telephone, and 20%-32% had an automatic washing machine. About one-fourth of respondents lived in homes with automobiles.

It appears that in Russia most first marriages take place when women are in their early twenties, since in each site a large majority of women between the ages of 20 and 24 were currently or previously in a registered or unregistered marriage. Only 9%-12% of respondents 25-29 years old had never been in union. In the oldest cohorts very few women had never been in union, especially in Ivanovo Oblast, where this figure was less than 4.0%. In the oldest cohorts as well, relatively large proportions of women were divorced or separated.

Age at marriage, although still typically quite young, appears to have been increasing recently (Table 5). In two of the sites among 15-19-year-olds and in all three sites among 20-24-year-olds, the percentage of women who had ever been in union decreased substantially between 1996 and 1999.

FERTILITY, ABORTION, AND PREGNANCY

The 1999 RWRHS collected information from each respondent on all of her pregnancies. In addition, for births and abortions that concluded since the beginning of 1994, more detailed information was collected regarding such topics as whether pregnancies were intended, breastfeeding, and abortion complications.

Fertility

Tables 6-8 present selected age-specific measures of childbearing for the three surveyed populations. As in much of eastern Europe and the former Soviet Union, childbearing in Russia tends to start an a relatively early age (Table 6). Among 20-24 year-olds, the average number of live births was already about 0.5. Completed family size for the oldest cohorts was 1.7 to 1.8 births per woman. Table 7, showing the percentage of women by age who have had any live

births, confirms the generally early start of childbearing among respondents, but also indicates that relatively few women begin childbearing before age 20. By ages 25-29, 76% to 81% of women had borne at least one child. Childlessness, at least in the older cohorts, was still fairly uncommon, with 7 to 9 percent reporting that they had had no live births. Total fertility rates (i.e., the mean number of live births per woman based on current age-specific fertility rates) according to the 1999 survey ranged from 1.2 in Yekaterinburg to 1.4 in Ivanovo, very similar to the rates found in the 1996 survey (Table 8). These rates are very low, but correspond well with official Russian statistics. No substantial changes in fertility between the two surveys are evident.

Abortion

The incidence of induced abortion in Russia has been among the highest in the world for many decades. However, official statistics have indicated that rates have been declining in recent years. Tables 9-11 display various age-specific abortion indicators from the 1999 RWRHS. The oldest cohorts of women (ages 35-39 and 40-44), reported a lifetime average of about two abortions in Perm and Yekaterinburg and slightly less (1.5 and 1.8) in Ivanovo Oblast (Table 9). Mean numbers of abortions among women with two or more living children were similar to or slightly higher than among the oldest cohorts of women. At each site, more than half (53%-58%) of respondents reported having had an induced abortion (Table 10). Among women in the 40-44 year-old cohort, the proportion who reported having had any abortions ranged from 71% in Ivanovo to 78% in Yekaterinburg. Among 20-24 year-olds, about one in three women reported having had at least one induced abortions.

The total abortion rate (i.e., the mean number of lifetime abortions per woman based on current age-specific abortion rates) was lowest in Ivanovo (2.14 abortions) and highest in Perm (3.11 abortions) (Table 11). An encouraging sign in regard to the possible impact of the Women's Health Project interventions was that the rate fell slightly since the 1996 survey in the two project sites and increased in the control site. The abortion rate (i.e., the probability that a woman reported having an abortion during the previous 12 months) ranged from .074 to .105, again revealing an increase since 1996 only in the control site, Perm. The abortion ratio (i.e., the ratio of induced abortions to live births) varied between 1.52 in Ivanovo and 2.35 in Perm.

Women were asked about complications and health problems resulting from each induced abortion, including miniabortions(vacuum aspiration done in the early weeks of pregnancy) since the beginning of 1994, both "soon after" and at least six months after the procedure. Overall rates of both types of complications tended to be lowest in Ivanovo (Table 12). The likelihood of reported complications did not differ consistently between conventional abortions and miniabortions across the sites. However these figures do not take the seriousness of complications into account. In Ivanovo and Yekaterinburg, the likelihood of rehospitalization or extended hospitalization due to complications was much higher for conventional abortions than for miniabortions. Although the numbers of abortions reported to be self-induced abortions were relatively small, the probability of associated complications appears to be much higher for those

events than for abortions performed by health care providers. Finally, no consistent change was seen between the 1996 and 1999 surveys in the likelihood of complications (short-term and long-term combined) in the survey sites, either for regular abortions or miniabortions (Table 13).

Pregnancy Outcomes

Only 27% and 36% of all pregnancies ending since the beginning of 1996 reportedly resulted in a live birth (Table 14). Between 5 and 9 percent of pregnancies ended in miscarriage or stillbirth. As in the 1996 survey, the majority of pregnancies in all three sites were terminated by abortion (either conventional or mini-abortion). The ratio of conventional abortions to miniabortions was slightly over 2:1 at each site. This ratio remained relatively constant across ages, except for ages 15-19, where very few abortions were miniabortions. The proportion of pregnancies resulting in a live birth declined sharply and steadily after age 20-24, indicating that most Russian couples still want to have their children shortly after marriage and while they are still young. Table 15 shows the percentage distributions of the outcomes of pregnancies in just over two years preceding interview. In one project site (Yekaterinburg) the proportion ending in abortion fell, while in Ivanovo it was relatively unchanged. In the control site, Perm, an increased percentage of pregnancies were reported to have ended in abortion, another possible indication of positive project impact.

Pregnancy Intentions

In all three sites, well over half of pregnancies that ended in January 1997 or later were reportedly unintended, ranging from 59% in Ivanovo to 69% in Yekaterinburg and Perm (Table 16). In each location, about half of pregnancies were said to be unwanted, i.e., after women already had all the children they wanted. An additional 12% to 20% were mistimed, i.e., they occurred sooner than intended. Most pregnancies occurring when women had no children were intended, while very few were unwanted. On the other hand, among women with two or more living children, from 84% to 89% of pregnancies were unwanted, demonstrating that a desire for a large family was rare.

Compared to the 1996 results, the 1999 survey reveals a substantial increase in the likelihood of unintended pregnancies resulting in a live birth (Table 17). Even with this increase, however, according to the 1999 data, only between 4% and 10% of unwanted pregnancies led to a live birth. Overall, slightly more than three-fourths of planned pregnancies resulted in a live birth in each site. Unintended pregnancies were much less likely to be terminated by abortion in the years leading up to the 1999 survey than in the period before the 1996 survey (Table 17, bottom panel). This was especially true for mistimed pregnancies, for which the likelihood of abortion fell from 79%-88% to 60%-67%.

Among fecund respondents, from 61% (in Perm) to 69% (in Ivanovo), said they wanted no more children (Table 18). As expected, the proportion wanting no more children increased sharply with the number of living children, from 10%-15% of women with none to 92%-95% of women

with two or more. Even among women with only one child, about half wanted no more. Differences between the three sites were small, as were differences between educational categories.

CONTRACEPTION

One of the principal reasons for conducting the 1996 and 1999 surveys was to examine in-depth the contraceptive practices of women in the survey sites. The conventional wisdom has held that the prevalence of modern contraception use in Russia is quite low, leading to high levels of unintended pregnancy and induced abortion. The 1996 and 1999 RWRHS call this belief into question, however, as they showed that low prevalence was not the case, at least in recent years. These surveys collected information on a broad array of topics related to contraception, including knowledge and use of contraceptive methods, source of methods, contraceptive failure and discontinuation, side effects, and reasons for nonuse of contraception.

Knowledge of Contraceptive Methods/Exposure to Family Planning Materials

Almost all respondents were familiar with condoms, oral contraceptives, and the IUD (Table 19), which were the most widely used modern contraceptive methods in the surveyed populations. Substantial majorities also were familiar with female sterilization, the diaphragm, vasectomy, and spermicide. The only method included for which knowledge remained very low was Norplant, which was known by only 12%-39% of respondents. Among non-supplied methods, both periodic abstinence and withdrawal were known by over 90% of women in each location. Over the three years between surveys there was a marked increase in knowledge of methods, except for those that were already almost universally known in 1996. The most striking increases in knowledge were for female sterilization, vasectomy, injections, and, especially in Yekaterinburg, Norplant.

The improvements in knowledge may have been partly attributable to efforts of the Women's Reproductive Health Project. Contractors developed several brochures that were distributed to project clinics, as well as more widely throughout the country through the Russian Family Planning Association. This series included a brochure describing all methods, three describing specific methods, and one, directed at youth, describing condoms. In addition, the mass media campaign included articles distributed through a regional newspaper network, a syndicated column ("Ask Dr. Olga") that appeared in regional newspapers, and a series of television and radio spots on family planning. General message spots promoted family planning as a means of protecting health and as a way of having "wanted children at the wanted time". Specific message spots dispelled myths and fears that many women had about various methods. Thanks to support from the Russian government at its highest levels, the spots received air time on national television, as well as showing on local TV stations in project sites.

Because many of the spots were aired nationally, residents of Perm were also potentially exposed to them. The survey results indicate that women from all three sites reported greatly increased exposure to family planning information, with 66% to 73% of women reporting having seen family planning information on TV in the previous six months, compared to about one-fifth three years earlier (Table 20). At each site about 60% reported seeing printed material about family planning, an increase of 25 to 34 percentage points from 1996.

Furthermore, 84%-91% of respondents indicated that they recognized the mass media campaign slogan, "Family planning...care for your health". Since this slogan appeared on national promotional spots, it was widely recognized in all three survey sites. The TV spots were supplemented by other activities at the project sites conducted to raise women's awareness of family planning and project clinics, such as open houses and local press conferences, increasing the recognition of the project logo (the swan) in the project sites (28%-38%) compared to Perm (16%).

Current Contraceptive Prevalence

Contraceptive prevalence among women in registered or unregistered marriages was high in all three locations, ranging from 70% in Perm to 75% in Yekaterinburg (Table 21). Far more users were employing modern methods of contraception than traditional methods (by a ratio of 3:1 or higher). The prevalence of modern methods ranged between 49% and 58%. Traditional methods (mainly periodic abstinence and withdrawal) were practiced by between 18% and 21% of couples. Overall contraceptive prevalence was 42%-52% among women with no living children and generally exceeded 70% among those with any living children. Overall contraceptive prevalence peaked at about 80% between ages 25-29 and 35-39, with the use of modern methods peaking in all three sites at ages 30-34 (Table 22).

As in 1996, the IUD was by far the most widely used contraceptive method among women in union in each of the three locations, accounting for somewhat more than half of all modern method use (Table 23). Despite maintaining its position as the most popular method, the prevalence of IUD use fell by 4 to 7 percentage points between the two surveys. The only other commonly used modern methods were condoms (13%-17%), which increased, and oral contraceptives (5%-10%), which stayed approximately constant. Use of female sterilization was only 1%-2%, even though most respondents wanted no more children. Periodic abstinence was used by 9%-14% of married respondents, the same as in 1996. The survey indicates that withdrawal use was uncommon in Yekaterinburg but was as widely practiced as periodic abstinence in Ivanovo.

Use of the IUD was rare among women without any children (Table 24). On the other hand, use of oral contraceptives decreased as the number of children increased. Not surprisingly, contraceptive sterilization was rare except among women with at least two children. In all sites, periodic abstinence increased sharply as the number children rose. Contraceptive use among women in union was strongly correlated with educational attainment (Table 25). Only about

one-half of women who had not completed secondary schooling were using contraception, far below the prevalence among better educated women. The greatest differences between women of different educational levels were in the use of oral contraceptive and periodic abstinence, both of which increased with education at all sites. IUD use increased with education in Ivanovo and Perm. Among the three of every ten women never in union who were using contraception at the time of interview, most used condoms, oral contraceptives, or withdrawal (Table 26). Of women previously in union, a larger proportion (four in ten) were using a contraceptive method. As with women in union, the IUD was overwhelmingly the method of choice for women previously in union in all three sites, followed by condoms and periodic abstinence.

Percentage distributions of sources of oral contraceptives, IUDs and condoms (the most widely used supplied methods) are displayed in Table 27. In all sites, pharmacies were overwhelmingly the primary source of oral contraceptives, with women's consultations far behind as the second most common source and drug kiosks third, except in Perm. Women's consultations were the leading source of IUDs, accounting for 53% (Ivanovo) to 64% (Perm). Most of the remainder were supplied by hospitals or pharmacies. Not surprisingly, pharmacies supplied most of the condoms use, accounting, with other commercial outlets, for all but a small proportion of condoms. Unfortunately, the survey questionnaire did not differentiate between sources of prescriptions, places of purchase, and (for the IUD) place of insertion.

Reasons for not Using Contraception

Between 45% (Ivanovo) and 55% (Perm) of married non-users of contraception cited the inability to become pregnant (subfecundity), current pregnancy, the desire to become pregnant, or a lack of sexual activity as their reason for non-use (Table 28). The most commonly given other reasons were "haven't bothered", difficulty getting pregnant, and only occasionally engaging in sexual activity. Fear of health effects was cited by 3%-4% of married non-users. Problems with cost or availability were mentioned by 3%-6%. Just as importantly, reasons such as lack of information regarding contraception, a preference for abortion, or the partner's objections were rarely mentioned. Not surprisingly, the absence or infrequency of sexual activity were the reasons most commonly given by unmarried women.

Unmet Need for Contraception

We estimated the percentage of women with unmet need for family planning services using two different definitions (Table 29). By the first definition, women who were sexually active, not currently pregnant, able to become pregnant, do not want to become pregnant, and do not use any contraceptive method are considered to be in need of contraception. By this definition, unmet need was almost constant across sites at 11%-12%. The second definition expands unmet need to include users of periodic abstinence and withdrawal (methods with typically low use-effectiveness). This definition nearly triples the proportion in need to 25%-29%. By the first definition, women with no living children were slightly less likely to be in need than those with children, but by the second definition they were far less likely. It should be kept in mind,

however, that these indicators do not take into account such factors as consistency of use and method effectiveness.

Preference for Other Methods

From 36% to 39% of contraceptive users said they preferred to use a method other than their current one, but the percentages differed considerably according to the method currently used (Table 30). Overall, withdrawal had the highest percentage of users wanting to switch (52%-74%), with condoms next (51%-54%). Only one of the 89 women who had been contraceptively sterilized indicated a preference for another method. Users of the IUD were relatively unlikely to say they would prefer another method (16%-21%). Among women preferring a different method, the IUD was cited most often as the preferred method (data not shown).

Opinions about Fertility Control Methods

Respondents were asked to rate a number of birth prevention methods with regard to safety and health effects, naturalness, and cost, as well as to give each method an overall rating. Possible ratings ranges from 1 (extremely negative) to 10 (extremely positive). Table 31 shows the percentage of women who gave very low ratings (1,2, or 3) for each of seven methods. The most noteworthy results are the almost universally negative opinions held by respondents in all three sites about both conventional abortion and miniabortion (94%-97%). With the exception of the IUD in Ivanovo, every method was rated negatively overall by at least 30% of respondents in each location. The IUD was the method least likely to receive a low rating, with condoms next. After abortion and miniabortion, female sterilization and injectables were the methods most frequently viewed negatively. With the exception of abortion, all methods were viewed much more positively than they had been three years earlier (data not shown).

With regard to safety and health effects, abortion was again viewed the most negatively (88%-92% for conventional abortion and 83% for miniabortion). Condoms were considered the safest method by a wide margin, followed by the IUD. Approximately one-half of respondents who had an opinion (43%-50%) considered female sterilization to be unsafe. None of the methods about which women were asked were generally considered to be of low effectiveness. Only condoms and IUDs were viewed by less than half of women to be very costly. Tubal ligation was seen by the most women as expensive, followed by abortion. (Women who did not have an opinion about particular characteristics for a given method are not included in these tabulations. For some methods, particularly injectables and tubal ligation, the proportions of women with no opinion were very high.)

Family Planning Referrals and Counseling

Between 42% (Yekaterinburg) and 52% (Perm) of women with recent (January 1997 or later) abortions reported that a doctor or nurse had discussed family planning with them afterward (Table 32). Only 10%-19%, however, were referred for family planning services or counseling.

About one-fourth left the health facility with a contraceptive method or a prescription for a method. Referral figures were substantially lower following deliveries than abortions; between 29% (Perm) and 42% (Yekaterinburg) of delivering women had a doctor or nurse offer to discuss family planning with them and only 6% to 10% left the facility with a family planning method or a prescription. Still, these figures represent a considerable improvement over the 1996 survey.

Approximately half of women at each site (50%-55%) who had ever used oral contraceptives, an IUD, or injectable contraceptives reported that the last time they started one of those contraceptives their provider discussed with them the variety of family planning methods available and which would be most appropriate for her (Table 33). Among ever-users of those methods, between 60% (Ivanovo) and 76% (Perm) reported that they made the choice of method themselves or did so in conjunction with their provider. In the remaining cases, the women reported that the choice had been made solely by the provider.

The type of information conveyed by providers in their interactions with a client can affect the client's satisfaction with services as well as method continuation rates and correct use. Of the women who said they had discussed family planning methods with a provider, just over one-half (56-58%) reported that the provider had explained the possible side effects of the method chosen. Between 62% and 71% of women reported that the provider had explained when to return to the service site for removal, resupply, or follow-up services.

YOUNG WOMEN'S SEXUAL EXPERIENCE

A series of questions regarding the start of sexual activity was asked of respondents between the ages of 15 and 24. The median age at first intercourse was about 18 years in Ivanovo and Perm and slightly younger in Yekaterinburg. The proportion sexually experienced reached about .90 at ages 20 or 21, and increased only gradually after that (Table 34). Relatively few 15-year-olds (0% in Ivanovo to 14% in Perm) reported that they had ever had sexual intercourse (data not shown). The percentage of females sexually experienced at almost every age in each site increased between surveys, indicating a general decline in age at first intercourse.

In the 1999 survey, between 44% and 50% of women with premarital intercourse reported that they or their partner used contraception at that time, similar to the figures in 1996 (Table 35). By a wide margin, condoms were the method most often used, followed by withdrawal and oral contraceptives.

MATERNAL AND CHILD HEALTH

Each respondent who had given birth in January 1994 or later was asked a series of questions regarding her most recent pregnancies and deliveries, including such topics as prenatal care, utilization of various health services, and infant feeding. The percentage of women who received no prenatal care during their last pregnancy that led to a live birth ranged from 4% in Yekaterinburg and Perm to 5% in Ivanovo (Table 36). Between 80% (Yekaterinburg) and 87%

(Perm) of mothers obtained prenatal care during the first trimester of pregnancy, an improvement over the 1996 survey. Women rarely waited until the third trimester to begin prenatal care.

Among women who delivered in January 1997 or later, just over half (51%-54%) were hospitalized for problems during pregnancy (Table 37). Not only were hospitalizations (other than for delivery) common, the durations of hospitalizations tended to be long: about 70% lasted at least two weeks and more than one-third lasted a month or more. These figures did not change substantially from the 1996 survey.

Breastfeeding appears to be a widespread practice, with about nine of every ten children born in January 1996 or later in each of the three sites reportedly breastfed (Table 38). The mean duration of breastfeeding, for those who did breastfeed, ranged from 6.4 months in Ivanovo to 8.1 months in Yekaterinburg. Most infants under six months of age (65%-75%) were still being breastfed, as were 11% (Ivanovo) to 40% (Yekaterinburg) of infants between 6 and 11 months of age. Although the prevalence of breastfeeding is high, further analysis of the infant feeding data collected in the survey is necessary in order to examine the extent of exclusive breastfeeding, because some of its health and contraceptive benefits may be diminished by the early introduction of other foods and liquids.

Cigarette Smoking

The percentage of respondents who said that they currently smoked cigarettes ranged from 20% in Ivanovo to 31% in Perm (Table 39). Prevalence tended to be highest among women in their twenties, but in Perm it was at least as prevalent among 15-19 year-olds as im any other age groups. Changes within age groups since the 1996 survey were inconsistent, except among 15-19 year-olds, for whom there was a substantial increase in all three sites. An inverse correlation between smoking and education was noted, whereby the best educated women were much less likely than others to report that they currently smoked.

SEXUALLY TRANSMITTED DISEASES/INFECTIONS

Sexually transmitted diseases and infections (STDs/STIs) have been a growing problem in recent years in much of Russia. The 1999 RWRHS included a module on knowledge about and diagnosis of specific STDs and conditions and symptoms often related to STDs. According to the 1999 survey, knowledge of gonorrhea and syphilis appears to be nearly universal (Table 40). The conditions known by the fewest respondents were human papilloma virus (19%-36%), genital herpes (29%-54%), genital ulcers (36%-47%) and chlamydia (27%-52%). Knowledge of almost all diseases and conditions increased sharply since 1996, however (data not shown). High percentages of women reported having had pelvic inflammatory disease at some time during their life (24%-27%). From 16% to 24% of women said they had been diagnosed with genital ulcers at some time. Reported lifetime incidence of gonorrhea was 1%-3% and chlamydia 3%-7%. About 1% of women in each site said they had ever been diagnosed with syphilis. Readers

should keep in mind that, since these estimates are based on self-reports, there is a possibility that the occurrence of STDs is underreported, owing to undiagnosed conditions and unwillingness to report them. On the other hand, some conditions could be overreported, as some diagnoses become more "popular".

For the previous 12 months, vaginal discharge with itching was reported by 4%-6% of respondents, with painful urination by 2%-3%, and with lower abdominal pain by 8%-12% (Table 41). Overall, one in ten (9%-11%) of respondents reported having genital sores or warts during the previous 12 months.

DOMESTIC VIOLENCE

The 1999 RWRHS included a module (not included in the 1996 survey) that asked women about both their lifetime and previous year's experience of being subjected to violence or threats of violence by her partner. Because of the high risk of underreporting of such incidents, the findings reported should be considered a conservative estimate of the incidence of violent behavior. Between 20% (Yekaterinburg) and 24% (Perm) of respondents who had ever been in union reported that a partner had ever committed any of the acts listed in the table against them (Table 42). For the previous 12 months these figures ranged from 7% to 8%. Most women who reported being subjected to violent acts said their partner had threatened to hit her and most said their partner had pushed or slapped them. Much smaller proportions said that their partner had threatened them with a weapon.

PROJECT IMPACT

The overall goal of the Russia Women's Reproductive Health Services Project was to reduce abortion-related maternal mortality. Nationally, the Russian National Statistical Office (GOSKOMSTAT) has reported a reduction in the maternal mortality ratio from 52 deaths per 100,000 births in 1993-94 to 44 deaths per 100,000 births in 1998. The number of abortion-related deaths has fallen even more sharply, from 204 deaths in 1993 to 129 deaths in 1998.as well as a concurrent. Because these surveys are not an appropriate means of directly measuring maternal mortality levels or changes, it is being used to infer the project's impact by looking at changes and differences in such variables as abortion rates, contraceptive use, knowledge of or exposure to family planning materials and methods, and contraceptive counseling.

One factor that has made it more difficult to assess the impact of project activities was the Russian fiscal crisis of August 1998. Among the widespread effects of the crisis on the Russian population may have been an impact on use of contraceptive methods and abortion, because of financial problems or, alternatively, increased motivation to prevent pregnancy. The 1999 survey asked women who received an abortion or changed contraceptive methods in August 1998 or later whether they felt that their behavior was in any way affected by the financial crisis. About one-fifth of women who had been using modern contraception said they had changed

contraceptive use following the crisis; about one-fourth of these (5%-6% of all women) reported the crisis as playing a role in their decision (Table 43). Most stopped using contraception or switched to another method. Five to seven percent of women had had an abortion since the crisis, with 40%-56% of them citing the crisis as a cause. Thus, despite its severity, the overall impact of the crisis on contraceptive use and abortion may have been relatively slight.

Certain changes over time and differentials between survey sites provide some indications of a significant impact of the Women's Reproductive Health Services Project. Among these are the following:

- The difference in abortion levels between project and control sites grew over time, with rates falling in the former and remaining relatively constant in the latter.
- Modern contraceptive use among younger women increased over time, and there was a widening gap evident among these women between the project and control sites.
- Women are much more informed about contraception than they were three years earlier.
 They have been exposed to family planning materials and are more familiar with various types of contraception than previously.
- Increased information has improved women's attitudes toward family planning and increased their understanding of the safety and effectiveness of modern methods.

Unfortunately, despite these improvements, some hoped-for changes have not taken place:

- Traditional method use has increased in some sites.
- Levels of unmet need for contraception have failed to decrease significantly.
- A smaller percentage of recent pregnancies were classified as planned in 1999 than in 1996.
- Fewer than half of post-abortion women and even fewer postpartum women reported that someone talked to them about how to avoid another pregnancy. The likelihood of receiving post abortion consultation declined in all sites since 1996.

TABLE 1
Percentage distributions of household and individual final interview status by survey site 1999 Russia Women's Reproductive Health Survey

	Ivanovo Oblast	Yekaterinburg City	Perm City
Selected households			
Eligible woman identified	45.5	29.5	33.1
No eligible woman in household	25.4	32.9	38.7
Household refusal	14.0	18.4	12.9
Residents not at home	6.7	10.7	6.2
Unoccupied household	1.7	3.3	4.7
Other*	6.8	5.3	4.4
Total	100.0	100.0	100.0
Number of selected households	4848	7296	6717
Selected eligible women			
Completed interviews	90.6	93.2	89.9
Selected women refused	7.0	2.3	5.7
Selected woman absent	1.0	3.3	3.1
Other	1.4	1.2	1.2
Total	100.0	100.0	100.0
Number of selected women	2207	2151	2224

^{*}Consists predominantly of situations where interviewers were unable to gain access to selected residences.

TABLE 2
Percentage Distributions of socio-demographic characteristics of respondents
1999 Russia Women's Reproductive Health Survey

Characteristic	Ivanovo	Yekaterinburg	Perm
			
Age			
15-19	12.4	10.7	13.3
20-24	16.6	17.4	17.9
25-29	18.4	15.5	16.3
30-34	15.5	17.3	14.2
35-39	19.5	19.8	20.6
40-44	17.6	19.2	17.6
Marital status			
Registered marriage	57.1	53.9	49.5
Unregistered marriage	7.9	8.3	13.2
Divorced/Separated	12.7	14.9	13.1
Widowed	2.8	2.3	2.4
Never married	19.4	20.7	21.7
Education			
< Complete secondary	18.6	7.3	10.1
Complete secondary	65.9	61.9	64.7
> Complete secondary	15.6	30.8	25.3
Nationality			
Russian	94.3	89.7	90.4
Non-Russian	5.7	10.3	9.6
Religion			
Orthodox	73.8	60.1	70.3
Muslim	1.0	2.3	2.4
Other	3.2	3.1	2.7
None	22.0	34.5	24.6
Total	100.0	100.0	100.0
Number of respondents	2004	2000	2000

TABLE 3 Percentage distributions of current employment status and home ownership and percentage of women who live in homes with selected possessions 1999 Russia Women's Reproductive Health Survey

Characteristic	Ivanovo	Yekaterinburg	Perm
Current employment			
Employed: 1 job	56.9	56.3	55.1
Employed: >1 job	3.6	6.9	5.5
On maternity leave	6.3	5.8	7.7
Not employed*	33.2	31.0	31.7
Unemployed**	15.1	9.3	10.5
Home ownership			
Cooperative	71.7	84.0	79.9
Own home	16.1	3.1	3.2
Communal	5.8	5.6	9.1
Rent	4.4	3.2	5.2
Other	2.0	4.1	2.6
Possessions in home			
Bathroom or shower	76.5	96.4	94.3
Color television	83.1	94.1	91.2
VCR	43.7	61.4	55.8
Telephone	37.0	49.2	51.3
Automatic washing machine	19.6	32.2	31.1
Automobile	20.1	28.7	25.9
Personal computer	2.4	10.3	5.6
Number of respondents	2004	2000	2000

^{*}Does not currently have a job, regardless of reason. **Does not have a job due to inability to find a job.

TABLE 4
Percentage distributions of current marital status by age of respondent 1999 Russia Women's Reproductive Health Survey

			Ag	e of resp	ondent		
	15-19	20-24	25-29	30-34	35-39	40-44	15-44
Ivanovo							
Married	7.8	50 .5	65.0	72.1	72.4	59.3	57.1
Unregistered Marriage	4.9	14.4	10.4	6.0	5.3	6.2	7.9
Divorced/Separated	8.0	6.4	11.4	16.5	13.6	24.2	12.7
Widowed	0.0	0.0	1.5	2.3	5.0	6.8	2.8
Never married	86.5	28.7	11.6	3.1	3.7	3.5	19.4
Number of women	260	365	362	315	363	335	2004
Yekaterinburg							
Married	5.6	33.3	62.5	67.0	66.9	67.2	53.9
Unregistered marriage	11.0	14.1	10.0	7.3	5.8	3.8	8.3
Divorced/Separated	1.6	8.6	17.0	19.5	17.9	18.7	14.9
Widowed	0.0	0.2	1.1	1.8	4.8	4.4	2.3
Never married	81.8	43.8	9.4	4.4	4.6	5.8	20.7
Number of women	217	343	315	347	391	391	2000
Perm							
Married	4.0	37.0	54.5	61.2	64.4	65.2	49.5
Unregistered marriage	9.3	23.8	16.4	12.2	10.5	6.4	13.2
Divorced/Separated	0.9	8.4	15.8	21.5	14.4	16.4	13.1
Widowed	0.0	0.0	1.2	1.5	4.8	5.9	2.4
Never married	85.8	30.8	12.2	3.7	5.9	6.1	21.7
Number of women	271	350	325	296	406	352	2000
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0

TABLE 5
Percentage of respondents who have ever been in union, by age at interview 1996 and 1999 Russia Women's Reproductive Health Surveys

Age at Interview

	15	-19	20	-24	25	-29	30	-34	35	-39	40	-44	15	-44
	1996	1999	1996	1999	1996	1999	1996	1999	1996	1999	1996	1999	1996	1999
Ivanovo	18.5	13.5	75.4	71.3	92.5	88.4	97.8	96.9	98.3	96.3	98.6	96.5	82.5	80.6
Yekaterinburg	14.4	18.2	68.2	56.2	89.3	90.6	93.1	95.6	94.6	95.4	96.4	94.2	77.0	79.3
Perm	22.1	14.2	72.7	64.9	90.0	87.8	94.6	96.3	93.5	94.1	96.8	93.9	79.8	78.3

TABLE 6
Mean number of live births by age of respondent
1999 Russia Women's Reproductive Health Survey

Age	Ivanovo	Yekaterinburg	Perm
15-19	0.1	0.1	0.1
20-24	0.6	0.4	0.5
25-29	1.1	1.0	0.9
30-34	1.5	1.4	1.3
35-39	1.7	1.6	1.6
40-44	1.8	1.7	1.7
15-44	1.2	1.1	1.1

TABLE 7
Percent of women with at least one live birth by age of respondent 1999 Russia Women's Reproductive Health Survey

Age	Ivanovo	Yekaterinburg	Perm	
15-19	6.0	4.5	3.2	
20-24	53.3	36.2	42.8	
25-29	81.2	79.6	75.5	
30-34	96.0	89.7	93.0	
35-39	94.8	90.7	90.5	
40-44	90.7	92.5	91.7	
15-44	73.8	70.4	68.4	

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TABLE 8
Age-specific and total fertility rates*
1999 and 1999 Russia Women's Reproductive Health Survey

Age	Ivar	novo	Yekateri	Yekaterinburg		erm
	1996	1999	1996	1999	1996	1999
15-19	.060	.041	.036	.046	.036	.039
20-24	.140	.128	.098	.083	.108	.109
25-29	.055	.080	.062	.068	.056	.072
30-34	.030	.021	.031	.030	.031	.025
35-39	.005	.010	.004	.008	.011	.016
40-44	.000	.003	.003	.008	.003	.003
Total Fertility Rate	1.45	1.42	1.17	1.21	1.23	1.32

^{*}Rates are for the 2-year period preceding date of interview.

TABLE 9
Mean number of abortions (including miniabortions)
by age of respondent and number of living children
1999 Russia Women's Reproductive Health Survey

Characteristic	Ivanovo	Yekaterinburg	Perm	
Age				
15-19	0.1	0.1	0.1	
20-24	0.5	0.5	0.6	
25-29	0.9	1.0	1.3	
30-34	1.5	1.6	2.0	
35-39	1.8	1.9	1.8	
40-44	1.5	1.9	2.0	
Living children				
0	0.2	0.2	0.3	
1	1.1	1.5	1.4	
2+	1.8	1.9	2.2	
All respondents	1.1	1.3	1.3	

TABLE 10
Percentage of women with at least one abortion (including miniabortions) by age of respondent 1999 Russia Women's Reproductive Health Survey

Age	Ivanovo	Yekaterinburg	Perm	
15-19	4.9	6.1	6.3	
20-24	32.2	32.8	36.4	
25-29	49.1	57.8	65.1	
30-34	71.3	72.7	81.8	
35-39	71.6	76.1	71.4	
40-44	71.2	77.6	76.8	
15-44	52.6	57.9	57.9	

TABLE 11 Age-specific abortion rates and other selected measures of induced abortion* 1996 and 1999 Russia Women's Reproductive Health Surveys

Age	lvaı	Ivanovo Yekaterinburg Pe		ovo Yekaterinburg		erm
	1996	1999	1996	1999	1996	1999
-		-				
15-19	.030	.026	.045	.043	.057	.063
20-24	.148	.098	.132	.143	.153	.169
25-29	.129	.083	.124	.091	.181	.141
30-34	.081	.134	.093	.096	.108	.120
35-39	.049	.067	.054	.051	.062	.073
40-44	.020	.019	.034	.034	.039	.058
Total Abortion Rate	2.28	2.14	2.41	2.29	3.00	3.11
Abortion Rate**	.077	.074	.079	.077	.099	.105
Abortion Ratio***	1.62	1.52	2.22	1.96	2.45	2.35

^{*}All rates are for the two year period preceding the date of interview.
**Proportion of women 15-44 years of age having induced abortions in one year.
***Ratio of induced abortions to live births

TABLE 12
Percentage of induced abortions with complications requiring medical treatment, percentage of those with complications that required additional Hospitalization, and percentage of abortions resulting in health problems at least six months later, by type of abortion
1999 Russia Women's Reproductive Health Survey

Type of abortion	Complications requiring medical treatment "Soon after abortion"		Received additional hospitalization after abortion		health p	-term roblems bortion*
	%	N	%	N	%	N
Ivanovo						
All abortions	11.9	442	43.0	<i>57</i>	3.6	442
Regular abortions	13.7	265	40.9	40	3.6	265
Miniabortions	8.3	148	**	14	2.9	148
Self-induced abortions	17.2	29	**	3	12.0	29
Yekaterinburg						
All abortions	13.1	457	49.9	66	7.7	457
Regular abortions	12.4	310	54.8	42	8.4	310
Miniabortions	15.7	129	35.9	22	6.2	129
Self-induced abortions	**	18	**	2	**	18
Perm						
All abortions	16.2	597	39.9	103	6.2	597
Regular abortions	15.9	398	44.3	69	5.8	398
Miniabortions	17.2	174	30.5	31	6.8	174
Self-induced abortions	25.8	<i>25</i>	**	3	19.6	25

^{*}At least six months after abortion

^{**}Fewer than 25 abortions

TABLE 13 Percentage of abortions with complications requiring medical treatment 1996* and 1999** Russia Women's Reproductive Health Survey

Type of abortion	Ivanovo		Yekaterinburg		Perm		
	1996	1999	1996	1999	1996	1999	
All abortions	13.9	12.8	16.1	16.5	17.6	15.4	
Regular abortions	13.8	15.1	17.7	15.5	18.1	15.5	
Miniabortions	14.0	9.5	13.3	19.4	17.5	15.5	

^{*}Abortions between January 1991 and date of interview **Abortions between January 1997 and date of interview

TABLE 14
Percentage distributions of outcomes of pregnancies ending since the beginning of 1996,
by current age of respondent
1999 Russia Women's Reproductive Health Survey

Pregnancy outcome	Age of respondent							
	15-19	20-24	25-29	30-34	35-39	40-44	15-44	
Ivanovo								
Live birth	47.0	53.8	43.6	27.7	10.6	6.9	36.4	
Stillbirth	0.0	0.0	2.1	0.9	0.6	0.0	0.8	
Miscarriage	14.7	5.5	4.3	1.7	1.5	4.4	4.1	
Miniabortion	3.4	13.4	16.2	26.9	29.5	9.1	18.7	
Other abortions	34.9	27.3	33.9	42.8	57.8	79.7	39.9	
Number of pregnancies	30	238	231	142	52	26	779	
Yekaterinburg								
Live birth	32.9	41.7	41.1	29.5	19.3	7.9	32.7	
Stillbirth	0.0	0.0	0.4	0.0	0.0	0.0	0.1	
Miscarriage	18.9	4.6	7.7	8.2	14.1	14.6	8.8	
Miniabortion	5.2	12.1	12.3	19.2	18.7	29.1	15.8	
Regular abortion	43.1	41.6	38.5	43.2	41.9	48.4	42.6	
Number of pregnancies	29	199	197	183	101	67	776	
Perm								
Live birth	27.8	41.1	30.8	15.6	14.3	9.8	27.1	
Stillbirth	2.0	0.3	0.0	0.0	1.3	0.0	0.3	
Miscarriage	11.7	8.2	6.9	7.2	15.5	6.3	8.8	
Miniabortion	18.2	13.5	20.0	22.2	19.3	17.8	18.2	
Regular abortion	42.4	36.8	42.3	55.0	49.6	66.2	45.7	
Number of pregnancies	35	260	260	183	127	63	928	
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	

TABLE 15 Percentage distributions of outcomes of recent pregnancies 1996 and 1999 Russia Women's Reproductive Health Surveys

Pregnancy outcome	lvar	iovo	Yekate	Yekaterinburg P		erm	
	1996*	1999**	1996*	1999**	1996*	1999**	
Live births	34.7	36.9	29.5	32.7	27.0	27.8	
Stillbirths	0.4	1.2	0.4	0.1	0.5	0.3	
Miscarriages	7.5	5.0	8.2	8.4	9.9	7.5	
Abortions, total	57.5	57.0	61.9	58.8	62.6	64.4	
Miniabortions	20.4	20.8	23.0	16.9	16.8	18.1	
Other abortions	37.1	36.2	38.9	41.9	45.8	46.3	
Total	100.0	100.0	100.0	100.0	100.0	100.0	
Number of pregnancies	600	<i>538</i>	526	543	661	676	

^{*} Pregnancies ending since 1/94. **Pregnancies ending since 1/97.

TABLE 16
Percentage distributions of planning status of pregnancies ending since January 1997
by number of living children at the time of pregnancy and pregnancy outcome
1999 Russia Women's Reproductive Health Survey

Characteristic	l	_				
	Planned	Mistimed	Unwanted	Unsure	Total	(N <u>)</u>
Ivanovo						
Total	39.2	12.4	46.5	1.8	100.0	<i>579</i>
Living children						
0	69.6	15.0	12.9	2.5	100.0	227
1	30.3	19.0	49.4	1.4	100.0	229
2+	12.5	1.8	84.2	1.6	100.0	123
Pregnancy outcome*						
Live birth	79.8	12.3	5.7	2.3	100.0	213
Miscarr./Stillbirth	58.1	11.9	30.1	0.0	100.0	30
Abortion	5.4	13.8	79.5	1.4	100.0	295
Yekaterinburg						
Total	29.4	20.0	49.1	1.4	100.0	579
Living children						
0	48.7	31.3	17.9	2.1	100.0	199
1	25.6	18.9	54.9	0.7	100.0	253
2+	5.1	3.7	89.2	2.0	100.0	127
Pregnancy outcome*						
Live birth	61.3	21.2	15.1	2.4	100.0	176
Miscarr./Stillbirth	40.8	16.5	39.2	3.6	100.0	47
Abortion	4.8	21.1	74.1	0.0	100.0	320
Perm						
Total	29.2	16.9	52.2	1.7	100.0	730
Living children						
0	48.4	25.9	24.0	1.7	100.0	276
1	21.8	15.5	60.3	2.3	100.0	292
2+	10.8	4.3	84.4	0.6	100.0	162
Pregnancy outcome*						
Live birth	72.2	19.4	7.4	1.0	100.0	191
Miscarr./Stillbirth	53.4	6.4	40.2	0.0	100.0	54
Abortion	3.1	18.2	77.4	1.4	100.0	431

^{*}Current pregnancies excluded from tabulations for pregnancy outcome.

TABLE 17
Percentage of recent* pregnancies resulting in a live birth and percentage resulting in induced abortion, by planning status of pregnancy
1996 and 1999 Russia Women's Reproductive Health Survey

Planning status of pregnancy	Ivanovo Yekaterinburg			Pe	Perm	
	1996	1999	1996	1999	1996	1999
			% Resulting	ı in live birth		
Planned	77.0	81.6	76.3	76.1	73.3	76.7
Mistimed	7.8	34.5	10.6	33.4	12.8	30.6
Unwanted	2.2	4.3	1.8	9.5	0.0	3.7
Unsure	21.2	**	15.6	**	19.5	**
Total	34.7	36.9	29.5	32.7	27.1	27.9
		9	<u>% Resulting in i</u>	nduced abor	<u>tion</u>	
Planned	9.4	8.5	10.0	10.7	8.8	7.5
Mistimed	88.2	59.9	83.3	59.9	78.8	66.5
Unwanted	93.7	92.0	93.3	84.1	97.0	90.6
Unsure	75.6	**	73.8	**	65.2	**
Total	57.5	57.0	61.9	58.8	62.6	64.4

^{*}For the 1996 survey, includes pregnancies ending since the beginning of 1994. For the 1999 survey includes pregnancies ending since the beginning of 1997.

^{**}Fewer than 25 pregnancies

TABLE 18
Percentage of fecund women in union who want to have no more children by number of living children by educational level of respondent 1999 Russia Women's Reproductive Health Surveys

Educational level		Number	r of living o	hildren	
	Total	0	1	2	3+
Ivanovo, total	69.2	15.1	54.1	93.6	93.6
LE complete secondary	68.7	16.3	52.1	93.9	93.1
> complete secondary	71.4	8.8	63.2	91.9	*
Yekaterinburg, total	65.6	9.9	50.1	95.4	95.4
LE complete secondary	69.2	15.2	51.1	95.1	100.0
> complete secondary	57.9	2.8	48.1	96.2	*
Perm, total	60.9	10.6	47.9	91.5	95.5
LE complete secondary	61.5	11.8	46.8	92.4	94.0
> Complete Secondary	59.2	7.7	50.8	88.9	*

^{*}Fewer than 25 cases.

TABLE 19
Percentage of respondents who know of specific contraceptive methods 1996 and 1999 Russia Women's Reproductive Health Surveys

Contraceptive method _	lvar	iovo	Yekate	rinburg	Pe	rm
_	1996	1999	1996	1999	1996	1999
Condoms	99.2	99.4	99.0	99.2	99.1	99.7
IUD	96.7	98.2	97.2	97.7	97.9	98.2
Oral contraceptives	96.7	98.6	98.0	98.5	98.0	98.1
Female sterilization	61.0	79.7	75.0	90.1	72.1	83.5
Diaphragm	67.9	72.4	78.8	85.1	77.2	80.4
Vasectomy	48.3	66.3	64.3	84.2	59.3	74.6
Spermicide	40.2	56.7	60.3	82.8	63.7	73.7
Injections	33.4	48.7	46.1	69.2	43.9	55.6
Norplant	8.2	12.3	14.6	38.6	12.0	19.9
Periodic abstinence	86.5	90.8	93.1	95.3	93.3	95.0
Withdrawal	86.0	91.5	85.9	94.4	87.0	92.2
Number of women	2016	2000	1974	2004	2007	2000

Table 20 Percentage of women reporting seeing* family planning information on television or in print and percentage who identified mass-media campaign materials 1996 and 1999 Russia Women's Reproductive Health Surveys

		Ivanovo		Ye	ekaterinbo	ırg		Perm	
	1996	1999	Change	1996	1999	Change	1996	1999	Change **
		-						-	
Seen family planning information on television	23.4	65.9	42.5	22.2	73.1	50.9	21.8	73.0	51.2
Seen family planning information in newspaper or Magazine	25.7	59.9	34.2	34.9	59.6	24.7	34.7	61.9	27.2
Recalled mass media logo (Swan)	NA	28.4	ΝA	NA	37.9	NA	NA	16.4	NA
Recalled mass media slogan (Family planningCare for your health")	NA	84.2	NA	NA	90.7	NA	NA	87.5	NA
Number of respondents	2016	2000		1974	2004		2007	2000	



^{*}Whether have seen such information in the previous six months.
**Percentage point change between 1996 and 1999 surveys

TABLE 21
Percentage of women in union using any contraception, modern contraception, or traditional contraception, by the number of living children
1999 Russia Women's Reproductive Health Survey

· · · · · · · · · · · · · · · · · · ·	Current contra	aceptive use		
No method*	Anv method	Modern	Trad. method	No. of women
57.9	42.1	32.1	10.0	146
22.0	78.9	58.8	19.2	<i>582</i>
24.6	75.4	52.6	22.8	<i>567</i>
27.2	72.8	52.9	19.9	1295
47.9	52.1	40.2	11.9	1 <i>65</i>
24.2	67.8	43.6	16.1	541
18.4	81.6	60.7	20.9	547
24.6	75.4	57.7	17.7	1253
51.9	48.1	36.2	11.9	187
27.8	72.2	49.0	23.2	544
24.0	76.0	54.3	21.7	524
29.8	70.2	49.3	20.9	1255
	57.9 22.0 24.6 27.2 47.9 24.2 18.4 24.6	No method* Any method 57.9 42.1 22.0 78.9 24.6 75.4 27.2 72.8 47.9 52.1 24.2 67.8 18.4 81.6 24.6 75.4 51.9 48.1 27.8 72.2 24.0 76.0	57.9 42.1 32.1 22.0 78.9 58.8 24.6 75.4 52.6 27.2 72.8 52.9 47.9 52.1 40.2 24.2 67.8 43.6 18.4 81.6 60.7 24.6 75.4 57.7 51.9 48.1 36.2 27.8 72.2 49.0 24.0 76.0 54.3	No method* Any method Modern Trad. method 57.9 42.1 32.1 10.0 22.0 78.9 58.8 19.2 24.6 75.4 52.6 22.8 27.2 72.8 52.9 19.9 47.9 52.1 40.2 11.9 24.2 67.8 43.6 16.1 18.4 81.6 60.7 20.9 24.6 75.4 57.7 17.7 51.9 48.1 36.2 11.9 27.8 72.2 49.0 23.2 24.0 76.0 54.3 21.7

^{*}Includes users of douche and folk methods.



TABLE 22
Percentage of women in union currently using any contraception,
Modern contraception, or traditional contraception*, by current age of respondent
1999 Russia Women's Reproductive Health Survey

Age		Current contra	aceptive use		
·	No method*	Anv method	Modern	Trad. method	No. of women
Ivanovo					
15-19	47.6	52.4	40.3	12.1	32
20-24	36.6	63.4	47.7	15.6	226
25-29	19.7	80.3	58.3	22.0	278
30-34	19.9	80.1	61.2	18.9	246
35-39	23.4	76.6	54.4	22.2	285
40-44	37.0	63.0	42.4	20.6	228
Total	27.2	72.8	52.9	19.9	1295
Yekaterinburg					
15-19	40.6	59.4	39.9	19.5	36
20-24	23.6	76.4	62.1	14.3	167
25-29	26.9	73.1	60.0	13.0	226
30-34	20.2	79.8	66.8	12.9	262
35-39	19.6	80.4	62.1	18.3	286
40-44	30.6	69.4	42.2	27.3	276
Total	24.6	75.4	57.7	17.7	1253
Perm					
15-19	31.7	68.3	36.2	32.1	39
20-24	30.4	69.6	49.7	19.9	213
25-29	29.6	70.4	52.2	18.3	237
30-34	20.3	79.7	55.1	24.6	216
35-39	30.6	69.4	50.0	19.4	302
40-44	36.4	63.6	42.4	21.3	248
Total	29.8	70.2	49.3	20.9	1255

^{*}Includes users of douche and folk methods.

TABLE 23
Percentage distributions of current contraceptive method, women in union 1996 and 1999 Russia Women's Reproductive Health Surveys

Current contraceptive method	ivan	ovo	Yekater	rinburg	Pe	rm
	1996	1999	1996	1999	1996	1999
Using any method	77.2	72.8	69.7	75.4	68.6	70.2
Using a modern method	58.9	52.9	55.4	57.7	50.7	49.3
IUD	35.4	28.5	27.6	23.7	28.0	23.3
Condoms	12.6	13.5	11.4	16.9	12.9	16.4
Oral contraceptives	7.2	7.4	10.0	9.5	5.2	5.3
Female sterilization	2.1	2.4	2.2	2.5	1.7	1.4
Vaginal methods	1.3	0.2	0.6	1.8	1.0	1.8
Morning-after pills	0.7	0.5	0.1	0.5	0.7	0.6
Combinations of methods	1.5	0.1	2.4	1.5	0.7	0.4
Other methods	0.1	0.4	1.2	1.3	0.6	0.2
Using a traditional method	18.3	19.9	14.3	17.7	17.9	20.9
Periodic abstinence	9.2	9.1	11.9	14.2	14.4	14.2
Withdrawal	9.0	10.8	2.4	3.5	3.5	6.7
Using no method*	22.8	27.2	30.3	24.6	31.4	29.8
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of respondents	1381	1295	1298	1253	1344	1255

^{*}Includes users of douche and folk methods.

TABLE 24
Percentage distributions of current contraceptive method by number of living children, women in union 1999 Russia Women's Reproductive Health Survey

				Number	r of living	children	1		
		Ivanovo)	Y	ekaterinb	urg		Perm	
Current contraceptive method	0	1	2+	0	1	2+	0	1	2+
	_					_			
Using any method	42.1	78.0	77.7	52.1	67.8	81.6	48.1	72.2	76.0
				Ì			Ì		
Using a modern method	32.1	58.8	54.3	40.2	43.6	60.7	36.2	49.0	54.3
IUD	2.7	30.9	32.2	3.7	23.5	29.5	3.5	21.7	32.1
Condoms	17.8	17.5	9.0	16.9	17.8	16.2	20.5	17 <i>.</i> 5	13.7
Oral contraceptives	8.5	8.9	5.9	14.9	11.6	5.9	11.2	5.6	2.9
Female sterilization	0.5	0.6	4.3	0.0	1.3	4.5	0.0	0.5	2.8
Vaginal methods	0.0	0.2	0.2	1.2	2.7	1.1	0.0	3.0	1.3
Morning-after pills	0.9	0.1	0.8	0.0	0.2	0.9	0.5	0.4	8.0
Combinations of methods	8.0	0.1	0.0	3.0	0.9	1.5	0.5	0.3	0.3
Other methods	0.9	0.4	0.3	0.5	1.6	1.1	0.0	0.0	0.4
				Ĭ			İ		
Using a traditional method	10.0	19.2	22.8	11.9	16.1	20.9	11.9	23.2	21.7
Periodic abstinence	3.4	8.3	11.1	6.3	11.9	18.6	6.4	13.9	17.5
Withdrawal	6.6	10.9	11.7	5.6	4.2	2.3	5.5	9.3	4.2
				ļ					
Using no method*	57.9	22.0	24.6	47.9	24.2	18.4	51.9	27.8	24.0
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of respondents	146	582	<i>567</i>	165	541	547	187	544	522

^{*}Includes users of douche and folk methods



TABLE 25
Percentage distributions of current contraceptive method, by educational level, women in union 1999 Russia Women's Reproductive Health Survey

Educational level Perm Ivanovo Yekaterinburg <Comp. <Comp. Comp. >Comp. Comp. >Comp. <Comp. Comp. >Comp. Sec. Sec. Sec. Sec. Sec. Sec. Sec. Sec. Sec. **Current contraceptive method** Using any method 49.8 73.3 55.9 68.5 75.1 82.8 52.2 82.3 77.9 Using modern method 32.9 54.5 63.2 55.9 53.1 43.4 63.1 38.3 48.8 IUD 12.9 30.9 31.5 21.9 23.5 24.3 23.8 15.9 22.5 Condoms 12.2 11.8 21.6 13.5 16.4 18.5 16.6 15.8 18.0 Oral contraceptives 4.3 8.1 7.1 6.0 7.9 13.2 1.8 5.7 5.3 Female sterilization 3.5 2.5 0.0 2.8 1.1 0.9 2.3 3.0 1.3 Vaginal methods 0.0 0.2 0.3 0.3 2.0 1.9 1.6 1.0 0.5 Morning-after pills 0.5 0.0 0.6 0.4 0.0 8.0 0.0 0.0 0.6 Combinations of methods 2.7 0.4 0.0 0.1 0.2 0.0 0.9 0.0 0.4 Other methods 0.0 0.3 1.2 1.4 1.3 0.2 0.0 0.0 0.0 Using traditional method 16.9 20.6 19.6 8.8 17.4 19.2 17.6 19.7 24.8 Periodic abstinence 2.5 9.8 11.6 6.6 13.6 12.7 13.3 17.2 16.1 Withdrawal 14.4 2.2 10.8 8.0 3.8 3.1 4.9 6.4 7.6 Using no method* 50.2 24.9 17.2 47.8 26.7 31.5 22.1 17.7 44.1 Total 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 Number of respondents 47 815 391 77 852 89 860 346 326

^{*}Includes users of douche and folk methods

TABLE 26
Percentage distributions of current contraceptive method by marital status, all women 1999 Russia Women's Reproductive Health Survey

				Ma	Marital status	sn			
		Ivanovo		γel	Yekaterinburg	ırg		Perm	
Current contracentive method	In union	Div./ Wid.	Never marr.	In union	Div./ Wid.	Never marr.	ln union	Div./ Wid.	Never marr.
Using any method	72.9	39.0	27.3	75.4	44.8	32.9	70.2	41.8	27.8
Leise modern method	53.0	34.0	18.6	57.7	37.2	29.1	49.4	30.8	21.5
	28.5	19.7	0.8	23.7	17.0	1.3	23.3	17.3	6 .
Condoms	13.5	0.9	11.5	16.9	10.0	15.6	16.4	7.3	15.4
Oral contraceptives	7.1	3.1	4.6	9.5	4.6	8.9	5.3	2.4	4.
Female sterilization	2.4	3.6	0.4	2.5	1.3	0.0	1.4	0.0	0.0
Vaninal methods	0.2	0.5	0.0	1.8	2.1	2.3	1.8	2.5	9:
Morning-after pills	0.5	-	1.1	0.5	0.8	0.5	9.0	0.9	0.5
Combinations of methods	0.1	0.0	0.2	1.5	0.5	0.5	0.4	0.0	0.5
	0.4	0.0	0.0	1.3	6.0	0.0	0.2	0.4	0.0
lising traditional method	19.9	5.0	8.7	17.7	7.6	3.8	20.8	11.0	6.3
Periodic abstinence	9.1	3.8	1.4	14.2	4.9	9.0	14.2	9.0	5.6
Withdrawal	10.8	1.2	7.3	3.5	2.7	3.2	9.9	2.0	3.7
Using no method*	27.1	61.0	72.7	24.6	55.2	67.1	29.8	58.2	72.2
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of respondents	1253	406	345	1295	412	293	1255	438	307
			_	_					

*Includes users of douche and folk methods

TABLE 27
Percentage distributions of source of contraception for current users of oral contraceptives, IUD, and condoms 1999 Russia Women's Reproductive Health Survey

Contraceptive method Yekaterinburg Ivanovo Perm **Source of Method** OCs IUD Condom **OCs** IUD Condom OCs IUD Condo m Pharmacy 25.9 7.8 76.8 70.9 16.3 81.5 87.6 80.4 79.6 Women's consultation 10.7 7.5 57.8 0.6 64.1 0.4 53.1 0.6 11.0 MCH center 3.2 0.2 0.3 0.0 0.0 1.1 0.4 3.8 0.0 Hospital 4.6 2.2 0.7 22.4 18.4 0.4 1.1 12.5 0.2 Drug kiosk 16.8 10.5 2.0 15.4 3.4 0.7 14.0 0.6 1.2 Private clinic/physician 0.6 0.0 0.0 1.2 0.0 0.0 0.3 0.0 0.0 Maternity house 2.6 8.0 3.1 0.0 0.0 0.0 0.0 0.0 0.0 Other source 2.2 2.0 5.3 3.2 0.0 1.7 4.4 2.8 0.7 Total 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 Number of respondents 127 268 166 360 315 85 351 442 300

TABLE 28
Percentage distributions of primary reason for not using contraception, by marital status
1999 Russia Women's Reproductive Health Survey

		Ivanovo		Yel	katerinbu	ırg		Perm	
Reason for not using contraception	In union	Prev. Marr.	Never marr.	In union	Prev. marr.	Never marr.	In union	Prev. marr.	Never marr.
Reasons related to pregnancy, fecundity, or sexual activity									
Not sexually active	4.6	53.1	83.3	5.7	48.7	74.6	4.9	49.8	80.6
Pregnant	11.1	8.0	0.0	9.6	0.9	0.0	11.2	1.6	0.5
Subfecund	17.4	18.9	2.0	21.8	15.6	2.6	26.1	18.2	3.0
Want pregnancy	12.2	1.9	0.0	14.0	2.5	0.7	12.8	2.5	2.3
Other Reasons									
Occasional sex only	7.7	8.9	8.7	14.9	21.2	15.4	9.3	16.5	8.2
Difficult to get preg.	10.2	8.4	0.8	9.7	4.7	2.2	7.8	4.7	0.5
Fear of health effects	3.3	0.9	1.0	3.5	0.9	0.3	3.9	0.0	0.4
Haven't bothered	14.8	6.3	1.9	10.2	2.0	3.6	10.6	2.1	3.4
Breastf'ding/Postpart.	5.6	0.0	0.0	1.9	1.1	0.0	1.5	0.5	0.0
Cost/Availability	6.1	0.5	1.6	2.9	1.4	0.3	3.3	1.3	0.6
Previous side effects	1.1	0.0	0.0	1.7	0.3	0.0	0.7	0.9	0.0
Partner objections	3.3	0.0	0.0	1.8	0.0	0.0	1.3	0.5	0.0
Dr. will not prescribe	0.6	0.0	0.1	0.6	0.0	0.3	1.8	0.0	0.3
Prefer abortion	0.0	0.0	0.0	0.8	0.6	0.0	0.3	0.0	0.0
Religion	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Other	2.9	0.0	0.6	0.8	0.0	0.0	4.5	1.3	0.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No. of respondents	295	165	291	297	187	274	364	176	318

TABLE 29

Percentage of women in need of family planning services, according to two definitions*,
by number of living children and educational attainment of respondent
1999 Russia Women's Reproductive Health Survey

Unmet need definition/ Characteristic	Ivanovo	Yekaterinburg	Perm
<u>Definition I</u>			
Total	11.7	11.0	11.7
Living children			
0	9.5	9.3	8.4
1	12.6	12.7	14.2
2+	12.5	10.5	12.0
Education			
< Comp. sec.	17.4	12.4	10.4
Comp. sec.	11.5	12.3	13.9
> Comp. sec.	6.2	8.1	6.6
<u>Definition II</u>			
Total	29.4	25.2	28.6
Living children			
0	18.3	15.4	16.5
1	30.1	28.4	34.8
2+	36.8	30.5	33.4
Education			
< Comp. sec.	30.8	16.5	17.6
Comp. sec.	29.7	27.4	31.0
> Comp. sec.	26.9	22.9	26.8

^{*}Definition I: Women are considered to be in need if they are sexually active or in union, not pregnant, fecund, did not want to get pregnant at the time of interview, and are not using any type of contraception. Definition II is the same as definition I, except that it also includes women using typically less effective methods of contraception (withdrawal, periodic abstinence, douche, and folk methods).

TABLE 30
Percentage of contraceptive users who would prefer using a different method of contraception 1999 Russia Women's Reproductive Health Survey

	Ivanov	10	Yekaterii	nburg	Pern	ו
Current contraceptive method	%	(N)	%	(N)_	%	(N)
Withdrawal	61.9	168	52.2	66	74.0	99
Condoms	54.4	268	53.4	315	51.2	300
Oral contraceptives	46.3	127	30.7	166	47.9	<i>85</i>
Periodic abstinence	37.9	145	37.9	192	40.7	214
IUD	16.4	442	21.1	360	17.3	351
Female sterilization	0.0	35	2.6	35	*	19
All methods	35.8	1,246	36.8	1,245	39.2	1,142

44

^{*}Fewer than 25 cases.

TABLE 31
Percentage of respondents giving various fertility control methods low ratings overall and with regard to selected characteristics of method 1996 Russia Women's Reproductive Health Survey

Method of Controlling Fertility

			Method	or Controll	ing Fertility		
Characteristic	Oral contracept.	IUD	Injectables	Condoms	Female sterilization	Convent. Abortion	Mini- abortion
Overall							
Ivanovo	41.6	26.9	53.6	40.2	65.6	95.0	93.5
Yekaterinburg	36.4	32.4	50.2	33.2	71.9	97.1	94.5
Perm	43.5	31.0	60.4	31.6	68.8	96.4	94.7
Safety/Health							
Ivanovo	23.1	18.6	35.3	4.7	49.5	88.1	82.5
Yekaterinburg	16.0	16.7	33.3	3.2	49.0	91.5	82.9
Perm	20.3	16.1	44.3	2.8	42.6	90.7	83.2
Effectiveness							
Ivanovo	6.2	4.9	8.5	6.0	3.9	NA	NA
Yekaterinburg	4.0	4.8	4.5	4.4	3.4	NA	NA
Perm	7.1	4.0	6.0	3.6	2.4	NA	NA
Cost							
Ivanovo	60.6	34.8	59.7	16.3	71.9	61.2	63.6
Yekaterinburg	50.9	16.6	52.1	8.1	79.2	70.4	65.3
Perm	48.4	20.2	52.9	10.9	78.6	60.0	61.3

NOTE: Respondents with no opinion have been deleted from the estimates for the corresponding cells.

TABLE 32
Percentage of Women who received various family planning services after their most recent delivery or abortion since January 1997
1999 Russia Women's Reproductive Health Survey

	lvano	ovo	Yekateriı	nburg	Per	m
Type of service	%	(N)*	%	(N)*	%	(N)*
Post-Abortion						
Talked to about ways to						
Prevent pregnancy	49.3	244	42.3	274	52.0	351
Referred for contraceptive Services or counseling	11.8	248	9.9	276	19.1	354
Left facility with contraceptive method or prescription	17.1	247	14.9	275	18.0	354
Post-Delivery						
Doctor or nurse offered to discuss contraception	40.1	196	41.9	160	29.2	185
Left facility with contraceptive method or prescription	9.8	198	8.2	163	5.8	184

^{*}Does not include respondents who did not remember whether they received a particular service. Numbers of respondents vary because of differences in numbers of respondents who did not remember information.

TABLE 33

Percentage of women who received various types of counseling' among women who have ever used oral contraceptives, the IUD, or injectable contraceptives 1999 Russia Women's Reproductive Health Survey

	Ivanovo	Yekaterinburg	Perm
Percent with whom health provider discussed various methods of FP	50.1	55.3	51.2
Percent to whom provider explained possible side effects of the selected method	57.1	55.6	57.9
Percent to whom provider explained when to return for removal, refill, follow-up	67.5	61.8	70.7
Number of respondents	980	984	857
Percentage distribution of the person selecting respondent's most recent contraceptive method:			
Both respondent and provider Respondent only Provider only	12.3 47.8 39.9	20.9 49.9 29.2	20.2 55.7 24.1
Total	100.0	100.0	100.0
Number of respondents	980	984	857

^{*}Counseling during the most recent visit concerning family planning.

TABLE 34
Percentage of respondents between the ages of 15 and 24
who ever had sexual intercourse, by current age
1996 and 1999 Russia Women's Reproductive Health Surveys

Current Age	e Ivanovo Yekaterinburg		Perm			
	1996	1999	1996	1999	1996	1999
15-16	16.3	7.5	11.4	20.4	18.0	22.2
17-18	40.4	51.0	46.9	59.0	55.8	52.9
19-20	71.9	75.5	76.9	87.2	75.4	80.5
21-22	90.4	94.0	88.5	90.9	88.3	92.7
23-24	94.0	95.1	97.0	95.8	96.3	90.6
15-19	38.6	42.1	38.0	56.1	45.7	47.8
20-24	89.9	92.1	90.1	92.8	89.2	91.3
15-24	65.2	70.8	63.8	78.8	68.4	72.8

TABLE 35
Percentage distributions of contraceptive method used at first sexual intercourse among respondents between the ages of 15 and 24 with premarital sexual experience 1999 Russia Women's Reproductive Health Survey

Contraceptive method	Ivanovo	Yekaterinburg	Perm	
Used any contraception	43.5	49.9	43.6	
Condoms	22.6	33.6	30.9	
Withdrawal	11.2	10.3	8.5	
Oral contraceptives	5.2	3.7	2.3	
Periodic abstinence	2.3	1.5	1.2	
Other methods	0.0	0.4	0.0	
Don't remember method	2.3	0.4	0.7	
Used no contraception	56.5	50.1	56.4	
Total	100.0	100.0	100.0	
Number of respondents	396	406	411	

TABLE 36
Percentage distributions of trimester when prenatal care began for the most recent pregnancy resulting in a live birth since January 1994
1999 Russia Women's Reproductive Health Survey

When prenatal care began	Ivanovo	Yekaterinburg	Perm
First trimester	81.9	80.4	86.8
Second trimester	11.9	15.2	9.3
Third Trimester	0.9	1.4	0.7
No prenatal care	5.3	2.9	3.3
Total	100.0	100.0	100.0
Number of pregnancies	450	395	381

Table 37
Percentage of pregnancies resulting in a live birth during which women were hospitalized and percentage distribution of length of hospital stays deliveries since January 1997
1999 Russia Women's Reproductive Health Survey

Hospitalization in pregnancy	Ivanovo	Yekaterinburg	Perm
Percent hospitalized	51.4	51.9	53.6
Number of pregnancies	213	176	191
Length of hospital stay			
<7 nights	4.3	2.0	7.8
7-13 nights	17.0	19.3	15.4
14-29 nights	35.3	36.5	33.5
30+ nights	36.9	40.3	40.8
Don't remember	6.6	1.8	2.5
Total	100.0	100.0	100.0
Number of hospitalizations	111	85	99

TABLE 38
Percentage of children born since January 1996 who were ever breastfed,
percentage of babies under two years of age still being breastfed by current age,
and mean duration of breastfeeding
1999 Russia Women's Reproductive Health Survey

_	Ivanovo		Yekaterinburg		Perm	
	%	(N)	%	(N)	%	(N)
% ever breastfed						
<u>Total</u>	90.0	297	93.0	245	89.8	242
Age of mother						
15-29	90.1	237	94.2	167	90.0	190
30-44	89.3	60	90.3	78	88.8	52
Education of mother						
No postsecondary	89.8	219	91.5	175	88.6	187
Any postsecondary	91.1	78	96.7	70	93.6	55
% Currently breastfeeding*						
<6 months old	64.8	45	67.8	23	75.2	22
6-11 months old	11.4	45	40.2	40	35.6	48
12-23 months old	15.1	70	22.2	77	9.7	79
Total (<24 months old)	27.2	160	34.4	140	28.2	149
Mean duration (months)**	6	3.4	8	i.1	6	.6

^{*}Percent of all living children currently breastfed.

^{**}Mean duration only for children who were ever breastfed, calculated using current status data.

TABLE 39
Percent of respondents who currently smoke cigarettes,
by age and level of education
1996 and 1999 Russia Women's Reproductive Health Surveys

Characteristic	Iva	ovo Yekaterinburg		erinburg	Perm	
	1996	1999	1996	1999	1996	1999
Age						
15-19	22.5	25.7	29.9	35.6	30.2	36.2
20-24	26.1	30.3	42.1	35.8	35.5	32.6
25-29	25.3	28.3	39.9	33.9	33.5	35.8
30-34	20.0	19.2	26.3	29.8	33.1	32.9
35-39	15.6	17.5	24.6	25.4	22.3	24.3
40-44	10.8	15.1	22.2	20.3	17.9	24.2
Education						
< Comp. secondary	18.5	28.9	31.0	40.3	39.9	42.9
Comp. secondary	20.8	22.2	34.2	31.3	29.3	33.2
> Comp. secondary	15.9	16.0	20.7	23.6	19.3	18.5
Total	19.6	22.5	30.4	29.4	28.2	30.5
Number of respondents	2016	2000	1974	2004	2007	2000

TABLE 40
Percentage of respondents who have ever heard of selected conditions and percentage who report ever having been diagnosed with those conditions 1999 Russia Women's Reproductive Health Survey

	lvanovo		Yekat	terinburg	Perm	
Condition	Heard of	Diagnosed with	Heard of	Diagnosed with	Heard of	Diagnosed with
Syphilis	98.7	0.6	98.9	1.0	98.7	1.2
Gonorrhea	94.3	1.2	97.3	2.5	96.4	2.1
Pelvic inflammatory disease	52.8	27.0	70.9	24.1	61.0	26.1
Trichomoniasis	77.9	6.5	88.3	9.7	85.3	11.2
Genital ulcers	51.9	18.6	57.5	15.7	56.9	24.0
Chlamydia	47.6	3.2	76.2	5.5	70.5	7.3
Genital herpes	29.1	2.9	53.6	2.9	42.2	5.7
Human papilloma virus	19.3	3.1	36.0	3.4	26.4	6.2
Vaginal discharge	91.7	38.4	93.7	42.2	93.6	52.2
Number of respondents	2000	- 1	2004	İ	2000	



TABLE 41

Percentage of Respondents who report having selected possible STD symptoms in the past 12 months
1999 Russia Women's Reproductive Health Survey

Symptoms Reported	Ivanovo	Yekaterinburg	Perm
Non-menstrual vaginal discharge	19.5	18.4	25.2
With itching	4.3	4.8	5.7
With painful urination	2.8	1.7	3.1
With lower abdominal pain	10.2	8.4	12.3
Genital sores or warts	11.2	8.7	10.2
Number of women*	1962	1984	1978



^{*}Excludes women who did not remember whether they had symptoms or refused to answer.

TABLE 42

Percentage of Women ever in union who reported being subject
to various types of threats and violence by their partner in the past 12 months and ever
1999 Russia Women's Reproductive Health Baseline Survey

	lva	novo	Yekaterinburg		ekaterinburg Perm	
Type of violence	Ever	Last 12 months	Last 12 Ever months		Ever	Last 12 months
Threaten to hit her or throw something at her	21.9	6.7	16.8	5.6	20.1	6.4
Push, shove, or slap her	18.3	6.9	15.5	5.8	17.5	6.4
Hit her with a fist or an object, or kick her	13.6	4.5	9.7	2.6	1 1 .4	3.4
Threaten her with a knife or other weapon	5.6	1.4	3.8	0.5	4.0	0.8
Any of these	22.3	8.0	20.3	6.6	23.7	7.8
Number of respondents	1767	1767	1876	1876	1839	1839

56

TABLE 43

Percentages of women who changed contraceptive method or had an abortion after August 1998 and the percentages of those that reported that the economic crisis affected their decision 1999 Russia Women's Reproductive Health Baseline Survey

	Ivanovo		Yekaterinburg		Perm	
	%	(N)	%	(N)	%	(N)
Changed contraception after 8/98	18.8	839	21.8	978	23.7	827
Crisis played a role in change	28.9	152	23.2	203	26.2	189
% of women affected	5.4		5.1		6.2	
			ł			
Abortion after 8/98	5.1	2000	5.0	2004	6.8	2000
Crisis played role in abortion decision	56.4	89	40.0	<i>9</i> 5	51.0	133
% of women affected	2.9		2.0		3.5	